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Substitute for Form 1449 A & B/PTO

Sheet

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Complete if Known						
Application Number	10/54175					
Confirmation Number						
Filing Date	July 08, 2005					
First Named Inventor	Kazumi SHIIKUMA					
Art Unit						
Examiner Name						
Attorney Docket Number	Q88894					

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Examiner Initials*		Document	Number					
	Cite No.1	Number	Kind Cade ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document			
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Substitute for Form 1449 A & B/PTO				Complete if Known		
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» INFO	RMATION D	ISCLOS	URE E 40	Confirmation Number	3893	
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A SOUTH				First Named Inventor	Kazumi SHIIKUMA	
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Examiner Initials*	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, and/or country where published.	Translation ⁶			
			 			
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Examiner Signature	5	5	Mottola	Date Considered	2-28-07

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